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POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS		Filing Date(s) First Named Inventor Title Patent Number Examiner Name Attorney Docket No	Method of 7043751 William W. (s). 370271	Ralf Fischer Method of Allocating Access Rights to a 7043751 William Wood 370271		
I hereby revoke all previous patent owner powers of attorney given in the above-identified reexaminaton proceeding control number(s).						
A Power of Attorney is submitted herewith. OR I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the proceeding(s) identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the proceeding(s) identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:						
Practitio	Registration Number					
James L. Ewing	30,630					
Michael S. Pavento	42,985					
Please recognize or change the correspondence address for the above-identified reexamination proceeding control number(s) (more than one may be changed only if they are merged proceedings) to be: The address associated with the above-mentioned Customer Number. OR The address associated with Customer Number: 23370 Firm or Individual Name Address						
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I am the: Inventor, having ownership of the patent being reexamined. OR Patent owner. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on						
SIGNATURE of Inventor or Patent Owner						
Signature		$\Lambda \Lambda I$	Date	June 29,	2009	
Name Bernhard Frohwitte			Telephone			
Title and Company Managing Director						
NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
*Total of 1 forms are submitted.						

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